

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0138
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>22088</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>William</u> <u>J</u> <u>Mountjoy</u> P.O. Box, Bldg., Room No., if any <u></u> Street <u>815 Sixteenth Street, NW</u> City <u>Washington</u> State <u>District of Columbia</u> ZIP Code + 4 <u>20006-4101</u>	4. Name, file number, and address of labor organization. Name <u>AFL-CIO</u> Labor Organization File Number <u>000-106</u> P.O. Box, Building and Room Number, if any <u></u> Street <u>815 Sixteenth Street, NW</u> City <u>Washington</u> State <u>District of Columbia</u> ZIP Code + 4 <u>20006-4101</u>
5. Position in labor organization. <u>Information Technology Director</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u></u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u></u> Street <u></u> City <u></u> State <u></u> ZIP Code + 4 <u></u>	7.a. Nature of Interest, Transaction, or Income. <u></u> 7.b. Amount. <u></u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>William J. Mountjoy</u>	On <u>08/15/2005</u> Date	<u>(202) 637-5129</u> Telephone Number

Name of Person Filing <u>William Mountjoy</u>	File Number <u>U-</u>
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B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>AvcomEast</u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u>Suite 1020</u></p> <p>Street <u>8150 Leesburg Pike</u></p> <p>City <u>Vienna</u></p> <p>State <u>Virginia</u> ZIP Code + 4 <u>22182</u></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u></u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u></u></p> <p>City <u></u></p> <p>State <u></u> ZIP Code + 4 <u></u></p>	<p>11.a. Nature of such dealing.</p> <div style="border: 1px solid black; padding: 5px; min-height: 80px;"> <p>Attended an AvcomEast technical briefing/dinner buffet and Washington Wizards Basketball game with 10 - 15 other AvcomEast employees, customers and business partners on 03/17/2004.</p> </div> <p>11.b. Approximate dollar value of such dealing. <u>\$100</u></p> <p>12.a. Nature of interest held or income received.</p> <div style="border: 1px solid black; height: 100px; min-height: 100px;"></div> <p>12.b. Amount. <u></u></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <u>Internet Security Systems, Inc.</u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u>6303 Barfield Road</u></p> <p>City <u>Atlanta</u></p> <p>State <u>Georgia</u> ZIP Code + 4 <u>30323</u></p>	<p>14.a. Nature of payment.</p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;"> <p>Attended an ISS technical briefing and dinner cruise with 25 other technical industry professionals on 04/29/2004.</p> </div>
<p>13.b. Is the Business an Employer <input checked="" type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment. <u>\$150</u></p>

Name of Person Filing William Mountjoy

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Oracle Corporation

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1910 Oracle Way

City Reston

State Virginia

ZIP Code + 4 20190

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Participated in an Oracle golf tournament with approximately 150 other technical industry customers, business partners and potential customers on 09/30/2004.

11.b. Approximate dollar value of such dealing.

\$125

12.a. Nature of interest held or income received.

12.b. Amount.

Name of Person Filing William Mountjoy

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name AT&T

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3033 Chain Bridge Road

City Oakton

State Virginia

ZIP Code + 4 22185

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Attended a "Greater Washington Board of Trade" luncheon with 10 other AT&T employees and customers on 12/02/2004.

11.b. Approximate dollar value of such dealing.

\$100

12.a. Nature of interest held or income received.

12.b. Amount.

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Visual Networks

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2092 Gaither Road

City Rockville

State Maryland

ZIP Code + 4 20850

14.a. Nature of payment.

Attended a technical briefing and Baltimore Orioles baseball game on 07/26/2004.

13.b. Is the Business an Employer ☒

or Consultant ☐

?

14.b. Amount of payment.

\$49

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐

or Consultant ☐

?

14.b. Amount of payment.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐

or Consultant ☐

?

14.b. Amount of payment.